PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 09/581007										
CLAIMS AS FILED - PART I SMA (Column 1) (Column 2) TYP								OR	OTHER	
FC	R	NUMBE	NUMBER FILED		NUMBER EXTRA		E FEE	7	RATE	FEE
ВА	SIC FEE		72.00	7.54			345.00	OR	840	665 5€00
то	TAL CLAIMS	3000	minus 2	0- 15	15)=	OR	X\$18=	270
INDEPENDENT CLAIMS 2 minus) = <u>*</u>	X39	=	OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT)=	OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2							AL	OR	TOTAL	1110
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						OTHER THAN SMALL ENTITY OR SMALL ENTITY				
EMT A	RE	LAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	36	Minus	.36		X\$ 9)= .	OR	X\$18=	
ARRE	Independent •	ON OF MI	Minus	ENDENT CLAIM		X39	=	OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+130	=	OR	+260=	
						TO ADDIT, I	TAL	OR	TOTAL ADDIT, FEE	
		olumn 1)_		· (Column 2)	(Column 3)	70011.1		.	-	
AMENDMENT B	3/1/04 RE	Laims Maining After Endment		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MOR	Total	40	Minus	<u>- 30</u>	= 4.	X\$ 9	=	OR	X\$18=	72
AME	Independent • FIRST PRESENTAT	ON OF MI	Minus	ENDENT CLAIM		X39:	=	ОЯ	X78 <u>-</u>	·
	THOU, NEGETIMEN OF WALLE EDGE CHARACTER STATE						=	OR	+260=	
						ADDIT. F		OR	APPYT PEE	12
(Column 1) (Column 2) (Column 3)										
AMENDMENT C	19/04 RE	XAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ROR	Total •	44	Minus	. 40	= H	X\$ 9	= -	OR	X\$18=	72
ARE	Independent -	رغ	Minus	3	=	X39=	:	OR	X78=	
_	FIRST PRESENTAT	ION OF MU	JUTIPLE DEP	ENDENT CLAIM		.400			+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20; enter "20." ***The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

Application or Docket Number